## APPLICATION FOR JUDICIAL BRANCH FEDERAL EMPLOYMENT

If you need additional space, continue under "Remarks" listing item number

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Position Title and Vacancy Number					Location  Los Angeles □ Santa Ana □ Riverside □		
Name Last, First, Middle Initial Mr. Miss. M.	Лrs.	Ms.			2. Phone Number Cell Phone Number		
3. Present Address (Street, City, State, Zip)							
4. Email Address							
Other Names Previously Used for Employment Purposes					6. Date of Birth (complete only for law enforcement positions)		
GENERAL							
7. Are you a U.S. Citizen?	□	YES	□	NO	If no, give the Country of your citizenship		
8. a. Were you ever a federal civilian employee?		YES		NO	If yes, give highest civilian grade:  Pay Plan Grade Step		
b. Are you receiving a federal civilian annuity payment?		YES		NO			
c. Are you receiving federal severance pay?	□	YES	□	NO	If yes, give former agency contact/telephone:		
d. Have you received a federal separation incentive payment in the past 5 years?	□	YES	□	NO	If yes, state mo/yr received and former agency contact/telephone:		
9. Do you have any relatives who are Judges, Officers or		YES		NO	If yes, give their names, positions, and relationships to you.		
employees of the United States Courts?							
10. Have you ever served on active duty with the military?		YES	□	NO	(If selected, you will need to provide your DD-214 (copy 4), Certificate of Release or Discharge from Active Duty, so that your service may be verified and credited)		
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violation of law committed before your 16th birthday, (3) any violation	n of l	aw comn	nitted	before	nolo contendere (no contest), but omit (1) traffic fines of \$300 or less, (2) any e your 18th birthday if finally decided in juvenile court or under a Youth Offender and (5) any conviction for which the record was expunged under Federal or state		
11. During the last 10 years, have you been convicted, imprisoned, on probation, or on parole? (Include felonies, firearms or explosives violations, misdemeanors, and all other offenses)		YES	□	NO	If yes, provide in Section 19 the date, explanation of violation, place of occurrence, and name/address of police dept or court.		
12. Have you been convicted by a military court-martial in the past 10 years?		YES		NO	If yes, provide in Section 19 the date, explanation of violation, place of occurrence, and name/address of military authority or court.		
13. Are you now under charges for any violation of law?		YES		NO	If yes, provide in Section 19 the date, explanation of violation, place of occurrence, and name/address of police dept or court.		
14. During the last 10 years, have you been fired from any job for any reason, did you quit after being told that you would be fired, did you leave any job by mutual agreement because of specific problems, or were you debarred from Federal employment by the Office of Personnel Management or any other Federal agency?		YES		NO	If yes, provide in Section 19 the date, explanation of problem, reason for leaving, and employer's name/address.		
15. Are you delinquent on any Federal debt? (Include delinquencies arising from Federal taxes, loans, overpayment of benefits, and other debts to the U.S. Government, plus defaults of Federally guaranteed or insured loans (e.g., student loan, home mortgage loan)).		YES		NO	If yes, provide in Section 19 the type, length, and amount of delinquency/default, and steps being taken to correct the error/repay the debt.		

EDUCATION								
16. a. Do you have a high school diploma or G.E.D. equivalent?		YES 🗖	NO	If yes, Da	ate of Con	npletion		_
b. Name and location of colleges or universities attended (including law schools)	Dε	ates Attended	Qı	Credit H	ours Semester	Degree	Date Received	Grade Point Average and/or scholastic standing
16. c. Other schools or training attended (list name/location of school	ol, da	tes attended, s	ubject s	tudied, ce	rtificates 1	received, and o	ther pertinent data):	
JOB RELATED SKII  17. List any skills (e.g., language, computer, keyboarding speed), ho								societies leadershin
activities, performance awards) that you believe are relevant to your ability to perform the job:								
APPL	ICA	NTS FOR	LEG	AL POS	ITIONS	S		
18. a. Are you admitted to the Bar?		YES 🗖	NO	If yes, lis	t the Bar(s	s) to which adn	nitted and date(s) of a	dmission. If no, skip to
Is your Bar membership		ACTIVE		INACTI	VE			
b. What was your scholastic standing in law school?		UPPER ½		UPPER 1	/3 🗖	UPPER ¼		
c. Were you a member of an editorial board of law review or a moot court participant?	□	YES 🗖	NO					
19. REMARKS (Use this space for continuation of answers. List the item number being explained.)								

## WORK EXPERIENCE

(Start with your present position and work back 10 years. Include any military service. Use additional page if necessary.)

Dates of Employment (mm/dd/yyyy)	Number of hours worked per week:	Exact Title of Your Position
From: To:	_	
Salary or Earnings	Pay Plan/Grade (If in federal Service)	Place of Employment
Starting \$ Per	(ij in jederai Service)	City
Final \$ Per	_	State
Name and Title of Immediate Supervisor		Name and Address of Employer (firm, organization, etc.)
Business Telephone: (Area Code and Phone Number)		
Reason for Leaving		
Description of Work		
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B  Detec of Employment (num/dd/num)	Number of hours	E (Tide of Vern Beriden
Dates of Employment (mm/dd/yyyy)	Number of hours worked per week:	Exact Title of Your Position
		Exact Title of Your Position
Dates of Employment (mm/dd/yyyy)		Exact Title of Your Position  Place of Employment
Dates of Employment (mm/dd/yyyy)  From: To:	worked per week:  — Pay Plan/Grade	Place of Employment  City
Dates of Employment (mm/dd/yyyy)  From: To:  Salary or Earnings	worked per week:  — Pay Plan/Grade	Place of Employment
Dates of Employment (mm/dd/yyyy)           From:         To:           Salary or Earnings           Starting \$         Per	worked per week:  — Pay Plan/Grade	Place of Employment  City
Dates of Employment (mm/dd/yyyy)  From: To:  Salary or Earnings  Starting \$ Per Final \$ Per	worked per week:  — Pay Plan/Grade	Place of Employment  City State
Dates of Employment (mm/dd/yyyy)  From: To:  Salary or Earnings  Starting \$ Per  Final \$ Per  Name and Title of Immediate Supervisor  Business Telephone: (Area Code and Phone Number)  Reason for Leaving	worked per week:  — Pay Plan/Grade	Place of Employment  City State
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From:	To:		
Salary or Earnings		Pay Plan/Grade (If in federal Service)	Place of Employment
Starting \$	Per		City
Final \$	Per		State
Name and Title of Immediate S	upervisor		Name and Address of Employer (firm, organization, etc.)
Business Telephone: (Area Coo	de and Phone Number)		
Reason for Leaving			
Description of Work			
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From:	To:		
Salary or Earnings		Pay Plan/Grade (If in federal Service)	Place of Employment
Starting \$	Per		City
Final \$	Per		State
Name and Title of Immediate S	upervisor		Name and Address of Employer (firm, organization, etc.)
Business Telephone: (Area Coo	de and Phone Number)		
D. C. I.			
Reason for Leaving			
Description of Work			

## APPLICANT CERTIFICATION

I certify that, to the best of my knowledge and belief, all of the information on and attached to this application is true, correct, complete and made in good faith. I understand that false or fraudulent information on or attached to this application may be grounds for not hiring me, or firing me after I begin work, and may be punishable by fine or imprisonment. I understand that any information I give may be investigated.

SIGNATURE	DATE SIGNED	

